

10/221578

APPLICATION FOR UNITED STATES PATENT
DECLARATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: _____

METHOD OF MANUFACTURING POROUS HONEYCOMB STRUCTURE, AND HONEYCOMB FORMED BODY

described and claimed in the specification:

Check one

- *a. ☐ attached hereto.
b. ☐ filed on _____ as Application No. _____ and amended on _____ (if applicable).
c. ☒ described and claimed in PCT International Application No. PCT/JP03/13429 filed on Oct. 21, 2003 and as amended under PCT Article 19/34 on _____ (if any).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:

Japanese Patent Application No. 2002-308067 filed on October 23, 2002.

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1 Yasushi Typewritten Full Name
of First or Sole Inventor

Yasushi

UCHIDA

Given Name

Middle Initial

Family Name

2 **Inventor's Signature:

Yasushi Uchida

3 **Date of Signature:

April

13th,

2005

Month

Day

Year

Residence:

Nagoya-city,

Aichi-prefecture,

Japan SPX

City

State or Province

Country

Citizenship:

Japanese

Post Office Address:

(Insert complete
mailing address,
including country)

c/o NGK Insulators, Ltd.,

2-56, Suda-cho, Mizuho-ku, Nagoya-city,

Aichi-prefecture, 467-8530 Japan

*If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

**Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☒

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PAGE 2 OF U.S.A. DECLARATION FORM
(Discard this page in a sole inventor application)

0270036142
WA-0854 USCPET.

1 200 Typewritten Full Name
of Second Joint Inventor (if any)

	Given Name	Middle Initial	Family Name
2	<u>Aiko</u>	<u>OTSUKA</u>	
3	<u>April</u>	<u>13th,</u>	<u>2005</u>
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Residence: Okazaki-city, Aichi-prefecture, SPX Japan
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1 300 Typewritten Full Name
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	Given Name	Middle Initial	Family Name
2	<u>Shuichi</u>	<u>ICHIKAWA</u>	
3	<u>April</u>	<u>13th,</u>	<u>2005</u>
	Month	Day	Year

Residence: Handa-city, Aichi-prefecture, SPX Japan
City State or Province Country

Citizenship: Japanese

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1 Typewritten Full Name
of Fourth Joint Inventor (if any)

	Given Name	Middle Initial	Family Name
2			
3			
	Month	Day	Year

Residence: _____
City State or Province Country

Citizenship: _____

Post Office Address:
(Insert complete mailing address, including country)

1 Typewritten Full Name
of Fifth Joint Inventor (if any)

	Given Name	Middle Initial	Family Name
2			
3			
	Month	Day	Year

Residence: _____
City State or Province Country

Citizenship: _____

Post Office Address:
(Insert complete mailing address, including country)

Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration form of the application to which it pertains.

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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**GENERAL POWER OF ATTORNEY
TO PROSECUTE APPLICATIONS BEFORE
THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Assignee Name and Address: NGK Insulators, Ltd.
2-56, Suda-cho, Mizuho-ku, Nagoya-city
Aichi-prefecture, 467-8530 Japan

appoints the patent practitioners associated with Oliff & Berridge, PLC Customer
Number 25944 to represent it before the United States Patent and Trademark Office in
connection with any and all U.S. patent applications assigned to the above-named assignee.

The undersigned is authorized to act on behalf of the assignee.

**ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD
BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NO. 25944, TELEPHONE
(703) 836-6400.**

October 28, 2004
Date

Takafumi Hochi
Signature

Typed Name: Takafumi Hochi

Title: General Manager, Legal Affairs &
Intellectual Property Department

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